

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]

The Bank & Trust of Bryan/College Station 979-260-2157

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

The Bank & Trust of Bryan/College Station
P. O. Box 5847
Bryan, TX 77805-5847
USA

FILING NUMBER: 10-00210619

FILING DATE: 07/21/2010 05:59 PM

DOCUMENT NUMBER: 316593130002

FILED: Texas Secretary of State

IMAGE GENERATED ELECTRONICALLY FOR WEB FILING
THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE # 07-0013388131		1b. <input type="checkbox"/> THIS FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS.	
2. <input type="checkbox"/> TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination.			
3. <input type="checkbox"/> CONTINUATION: Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law.			
4. <input type="checkbox"/> ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in item 7c, and also give name of assignor in item 9.			
5. AMENDMENT (PARTY INFORMATION): This Amendment affects <input checked="" type="checkbox"/> Debtor or <input type="checkbox"/> Secured Party of record. Check only <u>one</u> of these. Also check <u>one</u> of the following three boxes and provide appropriate information in items 6 and/or 7. <input checked="" type="checkbox"/> CHANGE name and/or address: Give current record name in item 6; also give new name and/or new address in item 7. <input type="checkbox"/> DELETE name: Give record name to be deleted in item 6a or 6b. <input type="checkbox"/> ADD name: Complete item 7a or 7b, and also item 7c			
6. CURRENT RECORD INFORMATION:			
OR	6a. ORGANIZATION'S NAME FORD MANUFACTURED STEEL, LLC		
	6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME
7. CHANGED (NEW) OR ADDED INFORMATION:			
OR	7a. ORGANIZATION'S NAME FORD STEEL, LLC		
	7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME
7c. MAILING ADDRESS 24900 FORD RD		CITY Porter	STATE TX
		POSTAL CODE 77365-5452	COUNTRY USA
7d. TAX ID# SSN OR EIN	ADD'L DEBTOR INFO	7e. TYPE OF ORGANIZATION Limited Liability Company	7f. ORG JURISDICTION TX
		7g. ORG ID #, if any TX-800691978 <input type="checkbox"/> NONE	
8. AMENDMENT (COLLATERAL CHANGE): check only <u>one</u> box. Describe collateral <input checked="" type="checkbox"/> No change <input type="checkbox"/> deleted or <input type="checkbox"/> added, or give entire <input type="checkbox"/> restated collateral description, or describe collateral <input type="checkbox"/> assigned.			
9. NAME of SECURED PARTY of RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by Debtor which adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here <input type="checkbox"/> and enter name of DEBTOR authorizing this amendment.			
OR	9a. ORGANIZATION'S NAME TEXAS ENTERPRISE BANK		
	9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME
10. OPTIONAL FILER REFERENCE DATA			

Exhibit "A"

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UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

11. INITIAL FINANCING STATEMENT FILE # (same as item 1a on Amendment form)				
07-0013388131				
12. NAME of PARTY AUTHORIZING THIS AMENDMENT (same as item 9 on Amendment form)				
OR	12a. ORGANIZATION'S NAME			
	TEXAS ENTERPRISE BANK			
	12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

13. Use this space for additional information

5. AMENDMENTS (continued):				
5. AMENDMENT (PARTY INFORMATION): This Amendment affects <input type="checkbox"/> Debtor or <input checked="" type="checkbox"/> Secured Party of record. Check only <u>one</u> of these.				
Also check <u>one</u> of the following three boxes <u>and</u> provide appropriate information in items 6 and/or 7.				
<input checked="" type="checkbox"/> CHANGE name and/or address: Give current record name in item 6; also give new name and/or new address in item 7. <input type="checkbox"/> DELETE name: Give record name to be deleted in item 6a or 6b. <input type="checkbox"/> ADD name: Complete item 7a or 7b, and also item 7c.				
6. CURRENT RECORD INFORMATION:				
OR	6a. ORGANIZATION'S NAME			
	TEXAS ENTERPRISE BANK			
	6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
7. CHANGED (NEW) OR ADDED INFORMATION:				
OR	7a. ORGANIZATION'S NAME			
	The Bank & Trust of Bryan/College Station			
	7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
7c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
P O Box 5847		Bryan	TX	77805-5847
7d. TAX ID#:	SSN OR EIN	7e. TYPE OF ORGANIZATION	7f. ORG JURISDICTION	7g. ORG. ID #, if any
				<input checked="" type="checkbox"/> NONE

FILING OFFICE COPY

Exhibit "A"

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]

The Bank & Trust of Bryan/College Station 979-260-2157

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

The Bank & Trust of Bryan/College Station
P. O. Box 5847
Bryan, TX 77805-5847
USA

FILING NUMBER: 10-00210622**FILING DATE: 07/21/2010 06:49 PM****DOCUMENT NUMBER: 316596540003****FILED: Texas Secretary of State****IMAGE GENERATED ELECTRONICALLY FOR WEB FILING
THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY**

1a. INITIAL FINANCING STATEMENT FILE # 07-0013388131		1b. <input type="checkbox"/> This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS.	
2. <input type="checkbox"/> TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination.			
3. <input type="checkbox"/> CONTINUATION: Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law.			
4. <input type="checkbox"/> ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in item 7c; and also give name of assignor in item 9.			
5. AMENDMENT (PARTY INFORMATION): This Amendment affects <input type="checkbox"/> Debtor or <input type="checkbox"/> Secured Party of record. Check only <u>one</u> of these. Also check <u>one</u> of the following three boxes and provide appropriate information in items 6 and/or 7. <input type="checkbox"/> CHANGE name and/or address: Give current record name in item 6, also give new name and/or new address in item 7. <input type="checkbox"/> DELETE name: Give record name to be deleted in item 6a or 6b. <input type="checkbox"/> ADD name: Complete item 7a or 7b, and also item 7c.			
6. CURRENT RECORD INFORMATION:			
OR	6a. ORGANIZATION'S NAME		
	6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME
OR	7a. ORGANIZATION'S NAME		
	7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME
7c. MAILING ADDRESS		CITY	STATE
7d. TAX ID# SSN OR EIN		7e. TYPE OF ORGANIZATION	7f. ORG JURISDICTION
		7g. ORG. ID #, if any <input type="checkbox"/> NONE	
8. AMENDMENT (COLLATERAL CHANGE): check only <u>one</u> box. Describe collateral <input type="checkbox"/> No change <input type="checkbox"/> deleted or <input type="checkbox"/> added, or give entire <input checked="" type="checkbox"/> restated collateral description, or describe collateral <input type="checkbox"/> assigned.			
All of Debtor's interest in the following property and all proceeds of such property, including documents covering inventory located at 24800 Ford Road, Porter, Texas 77365, or wherever located, and accounts of Ford Steel, LLC whether any of the foregoing is owned now or acquired later; all accessions, additions, replacements, and substitutions relating to any of the foregoing; all records of any kind relating to any of the foregoing; all proceeds relating to any of the foregoing (including insurance, general intangibles and other accounts proceeds).			
9. NAME of SECURED PARTY or RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by Debtor which adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here <input type="checkbox"/> and enter name of DEBTOR authorizing this amendment.			
OR	9a. ORGANIZATION'S NAME The Bank & Trust of Bryan/College Station		
	9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME
10. OPTIONAL FILER REFERENCE DATA			

FILING OFFICE COPY

Exhibit "A"

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]

The Bank & Trust of Bryan/College Station 979-260-2157

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

The Bank & Trust of Bryan/College Station
 P. O. Box 5847
 Bryan, TX 77805-5847
 USA

FILING NUMBER: 10-0026915751

FILING DATE: 09/17/2010 09:25 AM

DOCUMENT NUMBER: 328332440004

FILED: Texas Secretary of State

IMAGE GENERATED ELECTRONICALLY FOR WEB FILING
THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

OR	1a. ORGANIZATION'S NAME H.C. Jeffries Tower Company, Inc.			
	1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS 24900 Ford Rd.		CITY Porter	STATE TX	POSTAL CODE 77365
1d. TAX ID#; SSN OR EIN		1e. TYPE OF ORGANIZATION Corporation	1f. ORG JURISDICTION TX	1g. ORG. ID #, if any TX156033700 <input type="checkbox"/> NONE

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

OR	2a. ORGANIZATION'S NAME			
	2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
2d. TAX ID#; SSN OR EIN		2e. TYPE OF ORGANIZATION	2f. ORG JURISDICTION	2g. ORG. ID #, if any <input type="checkbox"/> NONE

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

OR	3a. ORGANIZATION'S NAME The Bank & Trust of Bryan/College Station			
	3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS 1716 Briarcrest Dr., Suite 400, P O Box 5847		CITY Bryan	STATE TX	POSTAL CODE 77802-2777
				COUNTRY USA

4. This FINANCING STATEMENT covers the following collateral:

All Inventory, Chattel Paper, Accounts, Equipment and General Intangibles;
 whether any of the foregoing is owned now or acquired later; all accessions,
 additions, replacements, and substitutions relating to any of the foregoing; all
 records of any kind relating to any of the foregoing; all proceeds relating to
 any of the foregoing (including insurance, general intangibles, and other
 accounts proceeds).

5. ALTERNATIVE DESIGNATION (if applicable): ☐ LESSEE/LESSOR ☐ CONSIGNEE/CONSIGNOR ☐ BAILEE/BAILOR ☐ SELLER/BUYER ☐ AG. LIEN ☐ NON-UCC FILING

☐ 6. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE
 RECORDS Attach Addendum [if applicable]

7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) ☐ All Debtors ☐ Debtor 1 ☐ Debtor 2
 [ADDITIONAL FEE] [optional]

8. OPTIONAL FILER REFERENCE DATA

H. C. Jeffries Tower Company, Inc.

FILING OFFICE COPY

Exhibit "A"

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER (optional)	
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
The Bank & Trust of Bryan/College Station 1716 Briarcrest Suite 400 P O Box 5847 Bryan, TX 77802-2777	



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SECRETARY OF STATE

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1. DEBTOR'S EXACT FULL LEGAL NAME - Insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME				
H.C. Jeffries Tower Company, Inc.				
OR	1b. INDIVIDUAL'S LAST NAME			
		FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS		CITY	STATE	POSTAL CODE COUNTRY
24900 Ford Road		Porter	TX	77365-5452 USA
1d. SEE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION	1g. ORGANIZATIONAL ID #, if any
		Corporation	TX	TX 156033700 <input type="checkbox"/> NONE

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - Insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME				
Ford Steel, LLC				
OR	2b. INDIVIDUAL'S LAST NAME			
		FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE COUNTRY
24900 Ford Road		Porter	TX	77365-5452 USA
2d. SEE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID #, if any
		LLC	TX	TX 800691978 <input type="checkbox"/> NONE

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - Insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME				
The Bank & Trust of Bryan/College Station				
OR	3b. INDIVIDUAL'S LAST NAME			
		FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS		CITY	STATE	POSTAL CODE COUNTRY
1716 Briarcrest Suite 400, P O Box 5847		Bryan	TX	77802-2777 USA

4. This FINANCING STATEMENT covers the following collateral:

All Inventory, Chattel Paper, Accounts, General Intangibles, and Equipment; wherever located; whether any of the foregoing is owned now or acquired later; all accessions, additions, replacements, and substitutions relating to any of the foregoing; all records of any kind relating to any of the foregoing; all proceeds relating to any of the foregoing (including insurance, general intangibles and other accounts proceeds).

5. ALTERNATIVE DESIGNATION (if applicable):		LESSEE/LESSOR	CONSIGNEE/CONSIGNOR	BAILEE/BAILOR	SELLER/BUYER	AG. LIEN	NON-UCC FILING
6. This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS Attach Addendum		7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (ADDITIONAL FEE) (optional)		All Debtors		Debtor 1	Debtor 2
8. OPTIONAL FILER REFERENCE DATA							